GROUP PSYCHOTHERAPY AND PSYCHODRAMA

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FOUNDED BY J. L. MORENO, 1947

A MEDIA-DIRECTED COMMUNICATION LEARNING PROGRAM*

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PREFACE

Somehow we have taken to the notion that more effective interpersonal communication can be taught—and, indeed, should properly be taught—with the help of our new educational technology, especially television and radio. We feel we are now on the threshold of some sharply increasing activity in this area. With the simultaneous rise of our new media and the rapidly expanding interest in human relations learning, both within the supportive context of the "Third School" movement, it seems to us almost inevitable that the mass media is soon used for heuristic needs. It is claimed that roughly two-thirds of the persons who participate in communication workshops or human relations labs *do* increase their interpersonal competence.

Controversy surrounds the use of this technique, because research findings published thus far provide confusing and often contradictory evidence of its positive value. The majority of studies have admitted its power as a learning experience in terms of effect, but the problems of measurement involved in attempting to assess this uniquely individual phenomenom termed "interpersonal awareness" raise some serious questions about the reliability and validity of much of the evidence. Human Relations training at its present level of development faces the problem, if it is to be put to its full use, of justifying itself scientifically, as well as humanistically. That is, "the reduction of ambiguity in behavioral data to tolerable levels demands systematic observations, measurement, and control." (1) This is an essential—if not more so—to the life and growth of this field of study as the investigation and development of the range of learning possibilities it opens up.

The mass media, particularly television, offer the intimacy and experiential qualities in learning, as well as having the capacity for lecture sessions on applied behavioral science theory. Such learning can occur in the home where there is not only privacy, but also where much of the learning can directly transfer—and where we suspect it is needed. Our new media technology can make such learning resources available to virtually everyone.

We think it is just a matter of time before the media is employed in some way toward such purposes, surely encouraged by the increasing consumer demand for such learning experiences. This seems to us an appropriate time that interested and responsible persons offer their leadership, for we think this is a time when direction is needed.

Historically, leadership and innovation in employing the publicly-owned broadcast service for human relations learning *has* been provided, but not fully accepted. As long ago as 1942 Moreno and others suggested that we realize the full educational potential in television for such purposes (8). He shifted the emphasis from personal pathology to everyday, normal needs in learning more effective social interaction. He changed the location from behind the secretive walls and brought the learning experiences into the social domain via the stage, and also tried to introduce them more broadly into the public domain via television (3). Bobula, briefly tracing the evolution of media use for communication kinds of learning, says:

> As we survey the last twenty years of television from our vantage point, our reaction would be one of mixed emotions from the point of view of spontaneity. While, by and large, television fell prey to the same traps as did radio, it does show definite spots of promise for spontaneous man (3).

More recently public television has been employed for human relations learning. Richard Farson, with the co-operation of KOGO-TV, San Diego, California, and the University of California Extension Division, produced a television program called *Human Encounter*, which, most (69 out of 72) participants say, helped them learn to communicate more effectively (4).

In close conjunction with this work, at the same Western Behavioral Science Institute, at LaJolla, California, Betty Berzon, Lawrence N. Soloman, Jerome Reisel, David Davis, and others, developed an audio tape program for self-directed groups (1, 2). In general, they have found that persons who participate in the learning program show positive change in their self-concepts, and indicate that the program does provide a meaningful learning experience.

INTRODUCTION

Statement of the Problem

A variety of group communication learning techniques have emerged over the past few years. These communication teaching and learning methods are drawing a great deal of attention from educators, professionals, executives, political and religious leaders, and communication scholars. If

publication items in scholarly and professional journals and in the public press serve to index the rate of interest, the current rapidly increasing attention could be called an "explosion."

The facts of the existence of this movement most frequently called "sensitivity training," and its phenomenal growth in terms of both supply and demand, are an indication of the interest in, and need for, ways and means to facilitate more effective human relations. In a culture where advances in the sciences and technology have double-timed corresponding advances in the humanities, the development of an important natural resource—the potential of the whole human being—has been fragmented and fragmenting. Our technology has given us glimpses into new worlds—outer space, atoms and smallest parts, the "inner world" of man, other cultures, other segments of our own society, and in general we, in our lifetimes, are in the midst of a revolution. Our world has changed greatly during the past thirty to fifty years, and the change is still going on.

Most of these changes are associated with some form of human communication, and may even occur as a result of communication. For the individual existing in our increasingly complex social, political, and economic systems, where members of our society are increasingly interdependent, one's individual communicative ability becomes crucial. Thus, the increasing complexity of our modern society seems associated with many changes.

The major purpose of a communication workshop is to help persons deal more effectively and comfortably with complex human relationships and problems. Accordingly, such a workshop shares the same goals with many other types of education. What distinguishes it from some other efforts is the emphasis upon the whole person—human experiences as well as cognition.

The study described herein was designed and conducted in the hope of uncovering programs and techniques that could make the positive benefits of such group experiences available to a greater number of individuals who could probably not otherwise afford them, in addition to validating a theory of learning and developing a measuring instrument to meet some of the research needs of the training itself. The former assumes developing a program design which divorces the experience from the greatest sources of expense: 1) the necessity of personal, proximate, professional supervision for the group; and 2) the necessity of travel to centers where such learning resources are available.

This is where the media can become much more involved. Human relations lab kinds of learning experiences have too long been within the proprietary rights of the intellectual elite, and other privileged segments of

society, and should be publicly shared. This view, of course, implies a need for continued research, both within small groups and in conjunction with media learning programs.

Objectives

The objective of this study is to assess the merit of self-supervised, programmed small group workshops as a means of promoting individual improvement in interpersonal relations and communication. Assumed in this are the following:

1. The development of a self-supervised small group communications workshop program of learning by means of instrumented input.

2. The assessment of the efficacy of the session inputs in terms of the stated learning goals by means of evaluating the transfer of learning involved for a research group of adults in a communication workshop conducted under it.

3. The assessment of the efficacy of the self-supervised learning program in terms of individual and group change in interpersonal relations and communication ability over time.

METHODOLOGY

Approach

The basic approach of the study is centered on an evaluation of the training effect on attitude and behavior found with the research group, as measured internally by the analysis of the data drawn from the administration of a series of five repertory grid interviews, and externally by sociometric analysis of the same data. The "internal" criterion measure is here defined as that which yields information about the individual participant's way of structuring reality (i.e., attitudes, opinions, and perceptions). "External" criterion measure is defined as that which yields information about the way the individual participant is perceived as fitting into the observable structure of the group.

To assess the training effect of the input, these goals have been rephrased for use as constructs in the repertory grid:

1. "Like I am in character."
2. "Like I'd like to be."
3. constructive feedback, warm, understanding
4. assumes responsibility for self and lets others do likewise
5. fun, capacity to enjoy the social communication process

6. checking out, analytical, searching
7. honest, open
8. "Most typical of the way others see me in terms of communication ability."

Administered in interviews scheduled following the first session (T_1), the fourth session (T_2) and the eighth session (T_3), the repertory grid with the above eight constructs and with four elicited constructs provide an index of on-going training effect, by reflecting changes in the activity levels and intercorrelations of the constructs.

Structure and Process

Under study is a group of seventeen individuals who elected a course sponsored by Dr. Robert R. Monaghan under the auspices of the Division of Continuing Education at The Ohio State University during Winter Quarter, 1970, and described (in the brochure) in the following way:

A SELF-DIRECTED COMMUNICATION WORKSHOP—Human relations training methods will be applied in a self-directed group. Mass media facilities will be employed to contribute to intensive human relations learning toward interpersonal honesty and competence, improved listening skills, leadership, greater understanding of social and organizational processes, and in general, more effective communication among members of an autonomous group.

Thursdays, 7:30-9:30 P.M.   Behavioral Science Laboratory
January 8-March 12, 1970   Dr. Robert R. Monaghan

Program of Learning

Essentially, the study centers on a basic series of workshop sessions and repertory grid interviews which have in common a set of learning objectives which are also measurement scales.

The sessions, while conforming to a basic underlying workshop pre-plan that anticipates the injection of learning situations relevant to the combination learning objectives/measurement scales, are in reality being individually planned as the workshop progresses on the basis of the workshop pre-plan and the outcomes of previous sessions. Thus, the stimuli presented are not frozen from the start of the study; rather, they are the product of accumulated experience. This procedure, it is felt, would optimize the individual sessions and tend to produce a more workable design as a potential outcome of the study.

Following is a session-by-session summary of the program of learning developed for a self-directed communication workshop.

Session 1—"Microlab"

Learning Objective: awareness of self, other; the context of communication learning.

Description:

Session 1 is designed to provide an opportunity, through microlab exercises, for a collection of self-selected individuals to become aware of the possibility of forming a communication learning group and to experience some of the potential learning inherent in any such group.

In the first few minutes of the session, the overall learning goals of the workshop are stated. Within the context of a search for more effective ways of communicating, the specific focus in this workshop is developing:

1. increased honesty and openness.
2. greater innovative capacity to search, analyze and check out one's own perceptions and behavior.
3. greater capacity to enjoy the social communication process.
4. greater capacity to assume responsibility for oneself and one's own behavior.
5. greater capacity to provide constructive feedback.
6. more accurate perception of self in terms of communication ability.
7. increased self-insight (actual and ideal self-concept).

The instructions for the first task are then provided. The goal is to learn the names of twelve persons in the group and something about each one. Milling silently, each group member is asked to select as a partner someone toward whom he feels warm and about whom he wishes to know more. Time is then allowed for individuals in the dyads to verbalize the reason(s) for their mutual selection. In the next few minutes, each member of the pair is invited to share with his partner "the most obvious thing" about himself and one thing that only someone who has known him for a long time would know. When the allotted time is up, the group is asked to reform a circle so that each member may share with the group what he learned about his partner.

The total group is later asked to divide themselves into two smaller groups (the "yellow" and "green" groups, each distinguished by marked name tags) and to form two circles. Looking each other member in the eye, each person was then asked to share with him his first impression of him.

The yellow group is then instructed to sit in a circle in the middle of the room while the members of the green group each place themselves behind a respective yellow group member as his silent observer. Within the next five minutes, the members of the yellow group are invited to share, individually, their here-and-now feelings while their silent observers are asked to keep in mind the task and to try to evaluate their partners' success in accomplishing it. Time is then given to the yellow-green pairs for evaluative feedback. The process is then reversed---the green group members are in the inner circle and the yellow group acts as their silent observers.

The larger group is then reformed and the group members are asked to try to express again, in the total group, their here-and-now feelings along the lines of their experiences this session.

Session 2—"Territorial Space"

Learning Objective: awareness of self in the communication process.

Description:

This session starts with a short story about a bird named Red Click and his instinctual fear of going beyond his familiar territory, even when it no longer affords him any protection. Incapable of relying on anything but his instinct, he dies rather than search for new protective cover. Some remarks by Wendall Johnson on the nature of human fear of unfamiliar territory are also included.

Group members then, in a short period of non-verbal milling, are invited to select a partner with whom they feel comfortable and to try to share with this person three things they, as individuals, find the most difficult to do in the larger group. Small groups of pairs of dyads are then formed for individuals to relate and to process their partner's difficulties.

A short narrative is then interjected on non-verbal communication, body language and the experience of sense communication. In the sense that for most people non-verbal communication experiences are "unfamiliar territory", group members are asked to select partners with whom they are less comfortable and to take with them a trust walk. One member of the pair volunteers to be "blind" (by closing his eyes) and to allow himself to be led around by his partner who then acquaints him with his environment without depending on language. When they non-verbally reach agreement, they switch roles. When both partners wish to terminate the experience, they do so. They then wait for the other group members to do likewise.

In the total group, members are invited to share their experiences.

As an assignment, each person is instructed to prepare a "sociogram" for the next session, visually representing in any way they wish the members of the group and their relationships to one another.

Session 3—"Feedback"

Learning Objective: experience in giving and receiving feedback.

Description:

The group is asked to assemble in a circle and to arrange the sociograms on the floor in a way that everyone may see them. They are invited to explain their perceptions of the group as represented in the sociogram as a way of providing feedback.

Each individual, still in the large group, is then asked to write on a slip of paper some feedback he "would give another group member if he were brave enough." Without signing a name, he is then invited to put the slip in the middle of the circle, and to draw one out other than his own. Relating to the group what is written on the drawn slip of paper, each member is then asked to express to the group what he would feel if he were providing someone with that feedback (e.g. what would make it difficult to share), and also how he would feel if he were receiving it.

Session 4—"Fun"

Learning Objective: enjoyment of the social communication processes.

Description:

Introductory remarks about non-verbal communication and play remind the group that words can inhibit or disguise communication and that non-verbal "statements" can often reveal true feelings more accurately. Children seem to have the capacity to simply enjoy communication and play without the strategies of language to which adults often fall prey. As a group, the members are asked to think about some of their favorite childhood games. They are then asked to share some of those games, without language, and to try to play, as children do, without words or language or strategies. After forty-five minutes on the playground, one group is asked to reassemble and to share its play experiences in an attempt to rediscover how, as grown-ups, they may lose the capacity to have fun and to search for ways to regain it.

Each group member takes home an assignment sealed in an envelope which instructs him to sketch a plan for a group activity that would help meet one or more of the learning needs of the group as he saw them.

Session 5—"Progress Report"

Learning Objectives: 1) assessment of individual and group learning so far.
2) greater capacity to assume responsibility for one-self and one's own learning.

Description:

As a total group, members are asked to analyze and to evaluate how they are progressing in terms of the learning goals.

It is suggested that they ask themselves such questions as "Where have we been?" and "Where are we now?" To determine where they want or feel they need to go as a group, they are instructed to divide themselves into three or four member sub-groups to present and discuss the learning plans that each had prepared for the session. Each small group is instructed to reach a consensus following the discussion on a priority of proposals to be presented by their representative to the total group. The suggested criteria includes available time, the learning needs of the group and the facilities provided.

Representatives from each group then form a circle to discuss and reach consensus on which plan is most beneficial and workable for the group at present, thus forming priorities for the group as a whole. They are then instructed to follow through on the consensus agreement by implementing the first proposal.

Following the activity, it is suggested that the whole group share indi-vidual feelings about action and reaction in the decision-making process, the project and their success or failure in meeting the needs of the group as they had assessed them at the start of the session.

Session 6—"Symbolic Interaction"

Learning Objective: indentification of self-concept through symbolic inter-action.

Description:

Group members are first instructed to gather themselves in a circle large enough that, by stretching, they can just touch one another. In that position, they close their eyes, lean back so that their heads rest on the floor, reach out to get a sense of their territory and simply listen. After a few moments of relaxation exercises, they are asked to sit up, eyes still closed, and to imagine themselves inside a cocoon. To get the sense and feel of it, they are asked to picture where it is located, what it is like inside and outside, if

there are any holes in it and where they are. When they feel ready, they are asked to emerge and to greet the other new creatures around them, with their eyes still closed and without talking.

Following the experience, the group is asked to reassemble and to try to describe their cocoons and their experiences within them and coming out of them, sharing the meanings they feel the experience had for them personally.

With further instruction, they share with each other the effect another's description of his experience had for them—what the experience, sharing, and personal effect of the telling of it say about relationships between and among themselves as members of this group.

Session 7—"Non-verbal Communication"

Learning Objective: awareness of the possible ways to communicate without words.

Description:

This session is designed to encourage exploration and experience with other, newer communication methods besides words and language. For forty-five minutes, the members are invited to communicate non-verbally in any way they see fit.

Reforming the total group, they are asked to relate their feelings during the exercise and to process the kinds of communication and communication patterns which evolved during the non-verbal exercise.

Session 8—"Simulation—Last Chance to Communicate"

Learning Objective: identification of ideal self-concept.

Description:

After listening to the song, "Is That All There Is?," it is suggested that the group ask themselves the same question, as if these are the last few minutes of the last session of this communication workshop. The invitation is to imagine themselves in that time when this would be their last chance to share what they may have wanted or tried to say in previous sessions. They are given a short time to do as they feel they want.

With a shift in focus, the group is asked to consider the communication process and their experiences in this workshop as an "inside job," providing them only with learning and change that they themselves seek, and to think about what there is to that. These things in mind, they are then asked to try to get in touch with their inside selves, considering what it would be

that they might want to share with another. The rest of the session is given over to that task.

<div align="center">Session 9—"Re-entry"</div>

Learning Objective: the process of applying your communication experience.

Description:

The group is given the task of abstracting general principles or statements of learning from the total communication workshop experience, and to consider the reality of the workshop experience in terms of the world outside. In three or four member sub-groups, they are asked to consider ways that communication experiences in the laboratory can apply to back-home situations and to write out statements they feel best describe what learning they can take with them from the workshop.

Reassembling the total group, the smaller groups present their statements of learning in order that the group as a whole can formulate a written "constitution" of communication principles for themselves out of this workshop experience.

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THE TRIADIC SYSTEM, PSYCHODRAMA-SOCIOMETRY-GROUP PSYCHOTHERAPY

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My concept of the "triadic system" is frequently referred to in literature. One of my original references to this is contained in a special section bearing this title, on p. 53, within my paper: "The Scientific Meaning and the Global Significance of Group Psychotherapy", p. 42-61, in the volume *Second International Congress of Group Psychotherapy* (Zürich, 1957), published by S. Karger, Basel, Switzerland, 1959.

The following statement appeared in the *International Handbook of Group Psychotherapy,* published by the Philosophical Library, New York, 1966, in my chapter "The Third Psychiatric Revolution and the Actual Trends of Group Psychotherapy", on p. 158:

I merged group psychotherapy, sociometry and psychodrama into a single system: the Triadic System.

The triadic system is the integration of three theories: the science of the group, the science of sociometry and the science of action. These are interrelated and indispensable to one another.

1. The first discovery was that interaction of individuals in groups has a therapeutic potential. Social interaction can lead to indifference, to violence and destruction, but also to integration and catharsis. The result was the concept of "therapeutic interaction" (one man a therapeutic agent of the other) and interactional, coactional group psychotherapy, which has become the foundation of all forms of group psychotherapy.

2. Therapeutic interaction found a solid scientific basis in the science of sociometry.

3. The greatest benefits accrue to group psychotherapy and sociometry through the action methods, therapeutic psychodrama, psychodrama in situ, and behavior training.

The experimental methods of group and action therapy did not prosper in university laboratories; they require the open communities as fields of testing and research. One can distinguish between two directions of experimental methods: (a) in the atmosphere of a university laboratory, for instance, Pavlov's experiment, and (b) in the atmosphere of the open community, as sociodrama, group psychotherapy, sociometry, family therapy, etc.

Conditions of the open experiment are: the visible body in space, in the here and now, real life, on the spot, in situ, the group, action and interaction, acting out, action and social catharsis.

16

ETHICAL CONSIDERATIONS IN LEADING THERAPEUTIC AND QUASI-THERAPEUTIC GROUPS: ENCOUNTER AND SENSITIVITY GROUPS

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Many ethical issues have been raised with the proliferation and mushrooming of new group approaches in the field. There is a need to clarify these ethical issues so we can move ahead with new explorations, and yet protect people from being hurt or manipulated in the process.

DEFINITION OF TERMS

"Therapeutic groups" will be defined as groups that have a goal to reconstruct personality and/or help people who have emotional problems that are preventing them from functioning and utilizing their capacities for growth and expansion of their personalities.

A leader of a therapeutic group should be trained to understand personality growth, change, and conflict. He should demonstrate his capacity for understanding others and himself, and for helping others to grow.

The therapist should also have a generally accepted code of ethics which he follows as a basis for forming a specialized helping relationship with others.

In contrast, "quasi-therapeutic groups" are defined as groups that attempt to deal with generalized problems of living, that may focus on changing one's role functioning; for example, to be a more effective administrator, teacher, or parent.

One may place the quasi-therapeutic groups on a kind of continuum that ranges from generalized encounters of a religious nature, to groups that educate teachers to be more effective. Some of these "religious" groups teach a philosophy of life that may give more meaning and efficacy in living. Several groups have goals to help teachers and others in leadership roles become more sensitive-emotive people, so they can help others more effectively in the setting in which they work. Other groups that fit into this

quasi-therapeutic role work in the area of helping to diminish stereotypes in race relations or other types of conflict areas.

The need for professional training of leaders for therapeutic groups would be different from training for quasi-therapeutic groups. Each setting needs to bear responsibility for setting standards of competency for its leaders. The state may have to establish competency requirements in the different institutional settings to help protect the public from unwarranted claims and unqualified practitioners.

In order to concretize this generalized ethical statement so it can be viewed more clearly, the following illustrations are offered: Let's assume that Leader A offers his services as a leader in a therapeutic group to the public, either privately or as a member of a group. He should meet standards set by the state and/or profession with which he is associated. Adequate supervision should be provided for those who are meeting experience requirements.

If Leader A cannot meet these qualifications, or the group cannot provide adequate supervision by qualified personnel, then Leader A should not be allowed to provide these therapeutic services to the public.

A few talented people may be lost in this manner, and a few inadequate leaders may be licenced to practice, but no system is perfect. The important principle is that the public is protected from possible harm without limiting legitimate exploration of new modes of therapy.

If Leader A were to function in a school as a teacher and lead quasi-therapeutic groups, such as role-playing or sensitivity groups for training teachers, then the institutional setting should help to maintain standards of qualifications for leaders. For example, Herbert Lehman College of the City University of New York instituted courses in sensitivity training as a required part of the teacher education program. Most of the leaders are qualified by the college to lead a group and in-service training in this area is provided for the staff.

If Leader A is going to privately provide quasi-therapeutic services, then there needs to be certain minimum ethical standards of advertising and training set by the state. However, the buyer will probably have to beware of the potential danger, as some of these groups could turn into therapeutic groups.

Usually leaders who function in such settings as churches, synagogues, A.A., or Synanon, may fall within the gray areas of definition. They may function as leaders in therapeutic or quasi-therapeutic encounters. However,

since they represent a well-defined group, the buyer has some idea of what he is buying, and the settings are geared to meet certain specialized needs.

The dangers to the public lie in the so called "unclear groups." They tend to advertise and mix therapeutic with quasi-therapeutic groups and make statements of promise that are unethical.

If the people that lead these groups are adequately qualified and/or supervised, and the public is made aware of the nature of the "contract" they are making as they enter the setting, then experimentation with new modes can be done in an acceptable manner.

The principle that is suggested is that experimentation with humans can occur if certain standards are met. The most important one has to do with the nature of the leader.

The particular service offered will determine the nature of qualifications for being a leader. If one is being offered an "experience" then it should be clearly stated what the experience is, as the label states what are the contents of a can of food or the contents of the clothing one buys. Certain drugs are also prohibited from being put on public display in order to protect people.

Several other ethical considerations are important in protecting people from being manipulated and losing their rights. They are:

1. Proper advertising that does not promise such changes as involvement in such groups . . . . "leads to greater spontaneity, creativeness, freedom of choice, and an ability to realize inner potential that has been blocked by maladaptive behavior patterns."

2. Adequate screening and explanation of the services offered, with the provision that there is no forced entrance into a group, and the individual has a right to have freedom of exit, if the group does not meet his needs.

The right of institutions forcing people into personal group setting that make them feel uncomfortable and prevents them from having free choice to remain in the group, should be seriously questioned. Under the guise of helping people to be more sensitive, one may actually be demonstrating the opposite by one's own behavior.

A person may be forced into a role where he is pressured to give up his rights as an individual to have freedom of choice. The ends and the means must be consistent. One cannot develop humanistic values by force or subterfuge as the act itself demeans human values. Certain courses such as human relations sensitivity courses may be requested in certain settings, as teachers need to develop skills that will help them to be more sensitive and effective in helping others. However, the groups should be guided by trained neutral leaders and not associated with supervision. The group should be

handled sensitively. Confidentiality should be established with adequate counseling follow-up, if people become upset in the process. Some groups the writer knows of, have "turned off" the students and actually increased the student's lack of trust and stereotyped behavior by certain insensitive encounters. There is a need to experiment, explore, and open up new horizons. Mistakes will be made but one should not destroy or use humans as automatons as one tries to explore.

3. There should be adequate anonymous feedback and evaluation from the people who are being experimented with. In this manner safeguards are provided to help prevent people from being hurt.

This paper has attempted to clarify some of the ethical issues involved in exploring new avenues for helping others to grow. These issues need to be clarified, and ethical practices need to be developed to protect people.

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ROLE-PLAYING IN A YOUTH EMPLOYMENT OFFICE

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In the summer of 1969 a group counseling program was set up in a youth employment office to particularly assist lower levels of urban, minority, disadvantaged youth interested in employment or training. In most cases, the counselees were school drop-outs, of low income or on welfare and had not gained from previous training experiences. The group counseling included remedial work in mathematics, spelling, reading, typing, role-playing in job interviewing and psychodrama and role-playing in areas blocking self-development.

The results of this group counseling program confirmed the views of Riessman (1) who suggested from his experience with New York minority youth that role-playing should be successful because (1) it is more appealing to them because of the physical action it implies and deals with concrete situations where intellectual reason and introspection are not required; (2) it allows the social worker, psychiatrist, etc., to honestly reduce the distance between their role and that of the person disagreeing with them, as well as to learn from inside "more about themselves"; (3) changes the setting of what appears as a bureaucratic, impersonal, institutional and strange world (verbal methods) and (4) it is an excellent way to develop verbal facility in persons with inadequate education.

A later study of Upward Bound, a government program for urban, disadvantaged youth considered college-potential, revealed that the main obstacle was lack of self-confidence based on the absence of social and verbal skills. The use of role-playing and psychodrama showed more successful ways of breaking the endless cycle of the fatherless home, the generation gap and the hostility in the ghetto (2).

The results of the present group counseling program paralleled in many ways the conclusions drawn from these two studies. However, the continued exposure of the counselees to role-playing situations developed social and verbal skills that had employment or training as a main focus. The magic theater that Moreno created offered these young people roles for success instead of academic memories of hopelessness and failure.

The following case studies indicate some of the many possibilities of role-playing in breaking traps of unemployability. As an interesting side-benefit, some of the staff took part in the group counseling sessions and

enjoyed the opportunity to understand and relate intimately to the coun-
selees. As Riessman also noted, when staff personnel are involved in role-
playing situations, they learn about themselves and can face some of their
problems and share them openly. This is how the barriers of "a bureaucratic,
impersonal, institutional and strange world" can be melted down.

CORA*

The members of the group who were black, living in ghetto areas,
and who felt themselves unemployable and yet had acquired some
degree of confidence and skills seemed to find the bridge of becoming
employable by acting the roles of success. Cora was heavy, shy, con-
vinced of her stupidity in mathematics, of a broken home and appar-
ently finding her security in academic achievement. She was now living
with her father and liked her boy-friend not being as smart as she was.
In three sessions, she took part in roles as job applicant, supervisor,
social-worker and in social situations. She freely took part in evaluations
of others and in confronting criticism of herself. At the end of the third
meeting, she wondered if she could get out of being dependent on her
father and if she were employable. Fortunately, a position was open as
bookkeeper-receptionist and she was hired after a trial period. Inciden-
tally, her school-acquired learning of being a mathematical "failure"
was ignored at these three meetings and she was forced to successfully
do simple mathematical problems with the expectation that this block
would be eliminated.

To give proper allowance to Cora's abilities, she had learned the
academic skills, to discipline herself, and was bi-lingual in knowing the
language of the ghetto and that taught in schools. However, as of the
first meeting, this would not have given her the self-confidence to face
employers and convince them of her worth.

IRIS

Iris, like many others in the group, was young, black, separated,
mother of a small child and on welfare. Unlike Cora, she strongly
resisted learning and every group counseling meeting was a battle of
resistance and acceptance. At her first meeting, she came in late and
made negative, disparaging remarks that convinced some male acquain-
tances to never return. She complained of not being hired, role-played
her unsuccessful interview and heard feed-back on reasons for her re-
jection.

After a two week absence, Iris appeared and as the least developed
of the counselees was given most of the attention. She role-played a
student, a school truant, her previous job rejection, heard a tape play-
back, tried a role as a qualified job applicant with the counselor as her

* Names used are fictitious to protect the identity of the counselees.

double, tried role-reversal as the employer, heard the tape play-back and the evaluation of the group.

She requested to leave early but took a "hot seat" in justifying her desire for a job, heard a more aggressive double for herself, tried the hot seat again, heard the group evaluation and tried another role as a salesperson. In her self-evaluation, she discussed her lack of interest in Mississippi schools and her mother labeling her as stupid. By the end of the session, her voice was more animated and definite.

Missing two months, Iris appeared again with the question why she did not get jobs. She role-played a job interview, heard the tape play-back, heard the group evaluation of her leaning on the desk, having a monotonous voice and negative impression. Iris was asked to estimate the time needed for her to improve in mathematics, spelling, typing and role-playing and came up with a guess of one hundred hours needed. The group then discussed how to organize time to study, to take care of the house and give time for themselves and their children. At this meeting, Iris openly admitted that there were reasons "why I got nuthin."

Skipping one meeting, Iris appeared with her small son. She role-played a department store-manager, an office-manager and took part in the evaluations. On the negative side, she refused to cooperate in verifications of spelling and did little to restrain or control her youngster's increasing boredom and restlessness. She was finally asked to leave with him to prevent the group from disintegration.

Gone another month, Iris heard Leslie mentioned as an example of improvement shown after regular attendance and determination. Iris started her usual attack as to why she was not employed and was confronted with her estimate of one hundred hours needed for self-improvement. In a moving scene that held the group spellbound, Iris discussed her qualities, hands resting on Leslie as her double. Iris said "I have to get off my seat, what kind of improvement do I have to make?, I have to trust myself."

When the group wanted to work on their spelling needs, Iris wanted to leave but was asked to stay for a few minutes more. When vocabulary was being discussed, she started to leave but when the community-worker told her to sit down, she did not resist and took part in the efforts for self-improvement.

The battle within Iris and with the objectives of group counseling may take a long time to resolve, but she is, at least, beyond the defeat of those who will not try or those who make one effort and then give up on themselves and their future.

LESLIE

Leslie was like Iris in appearing to be in the "endless cycle" of coming from a broken home, black, separated, mother of two children, on welfare, enjoying mothering but building up a resentment to spoiled, indulged children. The energy and determination Leslie was exerting

now would have put her at the top of her class if she were committed to
school-learning a few years back. Now it had enough affect on her
welfare-worker to provide Leslie with special considerations.

At her first meeting, Leslie discussed the goals she sought for her-
self, her children, parents, and her "old man." She role-played a clerical
applicant and took the role-reversal of employer. She tried the role of
street-walker applying for aid from a social-worker as Cora. In her
role as clerical applicant, Leslie appeared hesitant, doubtful and ex-
pressed many negative statements. In discussing personal problems,
she expressed her feelings about being cooped up in a small room with
two children and with being cutdown by her mother. She felt she was
getting straightened out now and getting a sense of independence. At the
end of the meeting, she was unique in expressing appreciation for all
the matters covered in the group counseling.

During the next eight meetings, in addition to practice in mathe-
matics, spelling, typing, Leslie wholeheartedly tried roles as department
store-manager, social-welfare worker, street-walker, bookkeeper-recep-
tionist, lingerie saleswoman, kindergarten teacher, nagging housewife,
self-indulgent husband, toy saleswoman, mother of two quarreling teen-
agers and work supervisor. In these roles, Leslie showed alternate ten-
dencies of permissive indulgence of children and over-aggressiveness of
a salesperson.

By her tenth meeting, Leslie was the model of achievement to a new
group counseling class. She demonstrated how to make clear, positive
statements in an application interview and how to sit in a poised, alert
and relaxed manner. She acted as the out-spoken double for members
who were hesitant and mentioned the gradual process of improvement in
mathematics, spelling and typing. At this point, she was in serious con-
sideration for training or employment referrals.

ALEC

Like many other applicants, Alec was black, school drop-out, with
a police-record, barely tolerated by his mother, having a girl who was
pregnant, with a negative attitude and a two year history of failure in
job referrals. As an individual counselee, he seemed frozen in a dead
apathy and test results showed scores well below his capacity. However,
he was aware of positive sides to his ego. He had good looks, a tall,
strong build, had won an art award in school and had been a member
and captain of the football team. In the streets, he had been successful
for a while as a pool hustler. The roles of success he took on in group
counseling apparently added to his basic self-confidence to convince him
that he was employable. In his case, he also seemed to confront himself
in his role-performances as a person who had more and more potentials.

At the first meeting, Alec took the part of an office-manager inter-
viewing a clerk-typist and reversed roles. He then role-played an elec-
trician job applicant and reversed roles as the employer. He became the
lazy man of the house nagged by his wife, applied for a job and reversed

roles with the employer. He tried a role as a clothing salesman and demonstrated an effective smooth, persuasive manner. Alec also convincingly acted the lazy, indolent part of another member. In a close circle, Alec told of his unpleasant confinement when he was jailed.

During the second meeting, Alec mentioned his long-term goal of being a professional football player. He role-played a bank official and office-manager. In discussing the impossible job, he said, "*I* could do anything." Trying a role as an Assemblyman appealing for votes from a caucus, he made a convincing political speech.

For the third meeting, the school and generation gap was explored. Alec took the role of school-counselor in a manner admired on tape by real professionals. He reversed roles as a truant, assumed a parent role and then that of a husband confronting his wife over school-child problems. The matter of jealousy of a black wife was dealt with. Alec discussed his experiences being bought by an older woman and then the return to his girl. He felt a particular benefit in the mother-child conflict for the release of some of his feelings.

At this time Alec had a choice of going to college on a football scholarship which was supported by the counselor or taking a job and assuming the responsibilities and enjoyments of husband and father. He took the job. His employer was very much impressed by Alec and asked if the employment office had other applicants of similar interest and capacity.

As a sequel to the explosion of talent shown by role-playing, it would be hopeful that Alec's career could be followed up in five or ten years to see if some of his potentials were realized.

DAN

Dan should have been an example of how one can make it in the ghetto. He was graduated from high school, had no police-record and was in a government program that was designed to give him pay increases and educational subsidies. The one, big problem was his difficulty to adjust to a matriarchal society.

In his first meeting, he was tongue-tied and unable to begin a conversation with a plain-looking, quiet young girl. But role-playing a supervisor, he was very effective in handling the complaints of four female department heads. He also did well as an office-supply salesman to the same four female department heads. Comment from Dan's counselor the following day revealed that Dan was a new person—calm, confident, without any hesitant speech patterns.

During his second visit, Dan was put on a "hot-seat" to justify his desire for mechanical training. He was surprised when a girl of his own color commented on her negative reaction to his "edginess." At the end of the meeting, Dan lashed out at the white female placement supervisor and while female placement worker, complaining of discrimination and lack of consideration. They felt very hostile and reluctant to offer any job referrals.

In the meantime, Dan's problem was brought up in a case conference and it was the consulting psychologist's opinion that more role-playing might bring out his problem with female supervisors.

Dan appeared two months later when a talented, black employment interviewer was present in the group. She and the counselor tried supervisor roles with Dan and with the extensive use of role-reversals; the intensity of his problem was both revealed and expressed. Apparently a two-way dynamic process had set. In Dan's own setting, he had an older brother who passively decided to be the "old man" of an older woman with children and money. Dan's relations with his mother was not clarified except that a father was missing and that Dan stayed in school and did not get into any trouble.

In role-playing situations, Dan indicated that he had accepted being put into humiliating positions. He was "treated like a child," had to chauffeur one of his supervisors to and from work, could be pressured to cut his hair, could be jumped on by them and have his Van Dyke cut off and could be made to serve their coffee. After four years, with a new supervisor cutting his responsibilities, Dan finally quit his promising government career.

At the end of this meeting, Dan role-played the big city cousin to the naive, country relation. He and the interviewer then had an eyeball to eyeball "mirror" confrontation and he found that she yielded to him and imitated his mannerisms. When told of the hostility he had aroused in the female placement worker in the previous meeting, Art was both surprised and pleased. At the conclusion of this meeting, he commented "what a trip."

The long range results of this facing-up to female power may never be known, but the immediate results were that he and the placement worker are now on very cordial relations and she is trying to get him placed in employment.

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ROLE TRAINING IN SPEECH CLASSES AT A METROPOLITAN COMMUNITY COLLEGE UNDER OPEN ADMISSIONS

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Borough of Manhattan Community College

This week, the Time-Louis Harris Poll in Time Magazine[1] demonstrated that blacks categorically felt that their best chance for progress was in getting more blacks better educated. This feeling is shared by our city administration as fostered by the Open Admissions Policy in City University. Under this plan, all high school graduates are eligible for college entrance. This fall, 30,000 students will be accepted from 55,000 applicants. This is 10,000 more than were accommodated this year.

The burden passes to the individual professor whose training along classical pedagogical lines is oriented toward "college material." New methods have to be devised, which will prove useful in maintaining motivation and effectively teaching those who have not taken the traditional route to college education. Responsive to this need, the administration of the Borough of Manhattan Community College has provided absolute support and encouragement toward the testing of a hitherto unutilized albeit promising development—role training as a method of teaching speech.

Role training, an offshoot of J. L. Moreno's brilliant pioneering work in psychodrama,[2,3] seemed especially appropriate for the Community College "open admission" student. By utilizing a method not dependent upon text books and lectures, by reaching out to this T.V. generation accustomed to viewing soap opera rather than to reading books, by advancing action level techniques, it was anticipated that the students would benefit and get more involved in their studies. By joining forces with the professor in this way, they do away with the influence of chauvenism, isolationism, and self-righteousness that so effectively tends to segregate the student population from its teacher. It was hoped that they would get over self-consciousness in speaking, gain understanding of their problems, develop spontaneity and develop new approaches to their problems as well as reacting with more adequate solutions, and improve in social relationships.

An exploratory study was planned to study the effectiveness of role training techniques in a basic speech course in an urban community college

[1] Time-Louis Harris Poll., "The Black Mood; More Militant, More Hopeful, More Determined. *Time,* April 6, 1970, pp. 28-29.

[2] Moreno, J. L., *Psychodrama:* Volume I. New York: Beacon House, 1946. 429 pp.

[3] ——, *Who Shall Survive?* New York, Beacon House, 1953.

as compared with the conventional didactic methods of training. Furthermore, the extent of training in action level methods on the part of the instructor, as it ultimately related to the accomplishments of the students, was evaluated by assessment of the results of a conventionally trained speech instructor against the results of an expert in role training.

It was hypothesized that (1) short term action level techniques would improve speech performance of the students in speech classes at Manhattan Community College; that (2) the role training groups would show improvement in attitudes towards speech; that (3) the role training group would be able to evaluate the performance of their peers more adequately than the traditional speech group (their critical ability in the assessment of the speech of others would be improved), and that (4) highly advanced expertise in socio-drama, psycho-drama, and role training on the part of the group leader would lead to gains more salutary than those evidenced by the class led by a teacher with rudimentary grounding in action level techniques.

Three basic speech classes, with twenty students in each class, constituted the experimental population. At the outset, they completed the Baird-Knower Speech Attitude Scale,[4] which numerically rated the social fear experience during public speaking. The three groups were comparable for the variable of speech attitude.

The individual students in each class gave three minute speeches, which were rated on a 5 point rating scale for speech performance by their peers as well as a visiting speech expert. The variables of general effectiveness, speech attitudes and adjustments, voice, articulation, physical activity, language, ideas, and organization were considered. The means for the total score of the three groups were 3.70, 3.81, and 3.76 as rated by the students and 3.04, 3.24 and 3.56 as rated by a speech instructor. The three classes were considered comparable for the purpose of the study.

One class received conventional speech instruction from a speech instructor; the second group did action level techniques with the same speech instructor; the third group had action level techniques with an expert in that area.[5] After six class sessions, the students once more gave three minute speeches, which were rated by their peers and a visiting speech expert. The resultant means of the total scores on speech performance as rated by the peer group were 3.78, 3.66, and 3,67. The means assigned by the expert for

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[4] Knower, Franklin H., "A Study of Speech Attitudes and Adjustments," Speech Monographs. V (1938), 130-203.

[5] Hannah Weiner—Director at Moreno Institute, New York, N.Y.

the same groups were 3.53, 3.10, and 3.37. Although the changes were not of statistical significance, There are some trends to be considered, and certainly, to be investigated further. First of all, the only group which showed improvement in the second speech, according to the rating of the independent speech expert, was the group undergoing role training with the expert in that field. This group had the lowest initial rating, but showed the highest rating for the second speech.

Another interesting observation is that all the students rated their peers higher than did the speech professor for the first speech. On the second speech, the peer evaluations were closer to that of the speech teacher. The role training group led by the role training expert came closest in evaluation to that of the speech expert rater. One of the goals of role training, to become critical of inadequate patterns, . . . to distinguish between rejection of a pattern of behavior and rejection of an individual,[6] is a goal of all teaching. It would seem that all three groups were better able to judge performance critically.

After the termination of the second speech, the Baird-Knower Speech Attitude scale was once again administered. An interesting point—at the outset, 35% of the students had acknowledged that they felt themselves less able than others to speak before groups and would gladly leave the talking to others. There was a 5% improvement in self evaluation on the part of both role training groups. More confidence and enthusiasm was expressed

In addition, observation demonstrated more warmth and interaction on the part of the role training group with the experienced director.

It is significant to note that, while the hypotheses were not substantiated, nonetheless, the role training groups kept pace with the traditional group. This despite the fact that recognized specialists in role training[7] feel that a minimum of 15 sessions is necessary for role training to be fully effective. In terms of these suggestive findings, it appears entirely appropriate to utilize role training in a more extended manner, while carefully assessing outcomes.

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[6] Haskell, Martin, An Introduction to Role Training, 1967.

[7] Personal communication with Martin Haskell.

WHAT IS SOCIOMETRY?

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Freedom of choice and the choice process underlying human relations is at the foundation of sociometry. Even in groups formed by children, choice of associates was found to be the most dynamic discovery in inter-personal relations. See, for instance, the series of sociograms from infancy on up through kindergarten, elementary school, up to adolescence and adulthood, as depicted in *Who Shall Survive?*, 1934 and 1953, and the first eighteen volumes of *Sociometry*, A Journal of Inter-Personal Relations, 1937-1956.

The choice process actually carried out throughout human society would amount to the "sociometric revolution" and give an answer to the "crisis of our age".

THE DIDACTIC AUXILIARY CHAIR

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INTRODUCTION

Some psychodrama directors are better than others in their ability to teach the methods and concepts of psychodrama at the same time that they are helping a protagonist enact his psychodrama. It is all too easy for the seasoned director to assume a knowledge on the part of the audience that isn't there. He forgets the slow learning process necessary to reach his own level of integration. In his zeal to identify with and assist the protagonist, he may forget the need of the audience to know what is going on and even their desire to know why the director is doing what he is doing.

Letting the audience in on the process is particularly crucial for the public sessions, which are avowedly didactic as well as therapeutic. It is equally important when meeting with special groups. In these audiences are people being exposed to psychodrama for the first time. As goodwill ambassador, the psychodramatist needs to "take them where they're at" and freely share what he knows. There are no secrets in psychodrama. "Learning how to learn," learning the method, is as much a part of the therapy as what is learned. One should not leave his first psychodrama session unfamiliar with some of the basic concepts such as protagonist, auxiliary ego, doubling, tele, role reversal, soliloquy and surplus reality.

I will now describe how the auxiliary chair may be used as a progressive learning instrument as well as a warm-up. The auxiliary chair has been defined as an empty chair portraying an absentee.[1] It is a special instance of the auxiliary object which is anything used by the director to represent or stand for an actual person who is not present.

PROCEDURE

When the didactic auxiliary chair is to be used, the action space is arranged in advance with some six or seven empty chairs surrounding the auxiliary chair. At this point, all these chairs face the audience. The immediate impression is that somehow these chairs will be filled as part of the demonstration. There will obviously be more than one person involved. It will be a group project.

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[1] Moreno, J. L., "Therapeutic Vehicles and the concept of surplus reality." *Group Psychotherapy*. Vol. XVIII, No. 4 December, 1965.

After a brief introduction, each member of the audience is asked to imagine someone important to him sitting in the auxiliary chair. Unless the director wants the session to focus on a specific topic, the instructions should be very general and vague. Something like the following will do:

> "I would like each one of you to imagine someone sitting in this chair with whom you have some unfinished business. Someone you would like to say something to, but haven't. This could be someone with whom you are currently involved; or it could be someone from your past. Perhaps you've lost contact with the person. You may never see that person again. What is important is that you would like to encounter that person: say something to him, ask him questions, exchange ideas. Take your time, and when there is someone sitting in the chair for you, let me know by raising your hand until I acknowledge you."

A statement any more specific will be taken by the uninitiated audience as a directive. For example, when a director once said, "perhaps there is someone you would like to tell off," each of the audience participants projected persons in the auxiliary chair whom they wanted to "tell off." Once I placed the auxiliary chair on a table to be sure it could be seen. Most of the audience participants, probably responding to the elevated prominence, saw authority figures in the chair.

When enough people in the audience have signaled their readiness, the director can begin asking individuals to first identify their projections and then to be seated in one of the chairs in the action space. Only rarely, under these circumstances, will someone not be willing to come forward. A refusal is, of course, honored graciously and often has a salutary effect. Knowing it is alright to say no, makes it easier to say yes. The descriptions are generally categorical, such as, my mother, father, boss, an old friend, etc. The volunteers are not put into psychodramatic action until all of the chairs in the action space are filled. Then the auxiliary chair is turned toward the protagonist's. The first protagonist is asked to describe the person he sees sitting in the auxiliary chair, before he talks to "him". This becomes a first lesson in role playing—addressing the chair *as if* it were occupied. Having been encouraged to express his feelings towards the auxiliary chair, the first protagonist may be interviewed briefly. The director goes on to the next protagonist (chair) only after being satisfied that even this brief encounter was therapeutic and meaningful.

The second protagonist helps the group understand the auxiliary ego concept. The director has an audience participant or a trained auxiliary fill the auxiliary chair and role play, as best he can, the important "other" projected by this protagonist. The idea of warming-up an auxiliary to the

role through reversal can be demonstrated with a third protagonist. Here, the purpose of role reversal itself can be explained. During the interaction of the fourth protagonist, a double can be brought in. What concepts are involved for each new protagonist depends, in part, on the spontaneity of the participants, in part, on the ingenuity of the director and chiefly on the appropriateness of their application. Hence, the action can become progressively more complex as each new concept is added.

By the time the last of the audience participants has had his encounter with the auxiliary chair, most of the basic psychodramatic techniques will have been introduced. If the director has been skillful, each participant will have had a therapeutic experience as he went through his "mini" drama. The group should be both warmed-up to, and better informed about psychodrama. Members in the audience probably have been having their own implicit psychodramas as they thought about people they might have put in the empty chair.

The director, by this time, has picked up innumerable clues both from those in the action space and those in the audience as to the most apt area of exploration for the session. He too has become warmed-up. Sometimes the most appropriate candidate for protagonist is obvious. He may be the person the group seemed most related to, or the person with the greatest immediate need, or the person that the director would feel most comfortable directing. The question "who shall be protagonist" is yet to be explored in depth. In a demonstration session, there is no better criterion for both theme and star than "the greatest good for the greatest number."

There will be situations where the use of the didactic auxiliary chair alone is sufficient. With a new group that will be meeting again for several sessions, the director might well use the entire first session in the didactic use of the empty chair. A didactic empty chair session also can serve as a good review for groups in training. But I have on several occasions, used the technique as a springboard to a classical psychodrama.

If the director does go from demonstrating method to a complete psychodrama, it is important that everyone knows what is happening. A new "contract" should be established with the person becoming the protagonist. He should be informed that the emphasis is shifting from technic to his specific area of concern. Even though the demonstration session is not a therapy, it does become personal. As a perceptive volunteer once said to this director, "this might be your drama, but it's my psyche."

I have felt very comfortable in using this approach. It helps avoid confusion on the part of the audience and protagonist as to what we are doing

and why. It quickly opens up common areas of concern and helps to distribute the exposure. It prepares both audience and protagonist for the use of role playing. It exposes the director in action before someone is asked to be a protagonist under his direction. It gives the outlines of the method, and imprints what psychodrama is without letting the process become too fuzzy. I hope other directors will use this approach, and let me know how they feel about it.

SUMMARY

A technique that might be called the didactic auxiliary chair is described. This variation of the empty chair can be used as a progressive learning instrument, as well as a warm-up to a classical psychodrama. The approach is seen as being particularly valuable for public sessions, special group meetings and the training of psychodramatists.

THE USE OF ROLE-PLAY IN PSYCHOTHERAPY TRAINING[1]

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INTRODUCTION

Role-play techniques have been employed in therapy (Moreno, 1959; Kelly, 1955; Corsini, 1966) and utilized to promote attitude change (Culbertson, 1957; Davis and Jones, 1960; Janis and King, 1954). In addition, role-play has been used for didactic purposes (Rosenzweig, 1968; Corsini et al., 1961; Klein, 1965). To our knowledge there has been little or no report of the use of role-play for training beginning psychotherapists. In this paper, we describe the development of such a training technique.

There are an overwhelming number of problems, felt or real, facing the beginning psychotherapist. Even with a gackground of theoretical course work, observations of ongoing psychotherapy, discussion groups, problem-oriented seminars, and personal psychotherapy, a student becomes competent only by accumulating many hours of experience in the role of psychotherapist. The beginning psychotherapist is thus open to doubts and anxieties concerning his own competence. He may vacillate between fantasies of rescuing and fantasies of destroying the patient.

The beginner often feels he must be an instant expert. The opportunity for close supervision by an experienced therapist is generally insufficient to overcome these initial doubts and anxieties. In fact, the self-comparison with an experienced psychotherapist may make the goal of becoming competent seem relatively unobtainable.

Faced with these initial problems, two beginning therapists became partners in evolving a training procedure utilizing role-play. It was effective in lessening the anxiety, highlighting some of the problems, and working out possible solutions. The procedure involved three stages: (1) observation, (2) discussion, and (3) role-play. Role-play was used regularly during the beginning four to six months before and after each therapy hour. After this time, it was used only to help with specific problems.

Each therapist observed every therapy session of his partner therapist through a one-way mirror. The observer took notes pertaining to technique, the flow of verbal and non-verbal communication, and the formulation of

hypotheses as to possible dynamics. The therapy session was followed by a critical discussion and role-play.

Initially, it was painful and embarrassing to be observed and afterwards to have to face a waiting critic. However, because the observations and criticisms were reciprocal and because of the supportive nature of the relationship, these feelings rapidly diminished. Effort could then be directed toward problems which arose from the therapy session itself. These problems were dealt with through role-play. The therapists took turns playing the parts of patient and therapist. This required that the person playing the patient try to understand, empathize and experience what it is like to be that individual. Similarly, the person playing the therapist had to become sensitive to the therapist as an individual. In addition he had to be aware of the therapist's response, or likely response, to various interpersonal situations. Where discussion had been inadequate to communicate criticisms, role-play vividly demonstrated them. Where discussion had been inadequate to suggest alternative methods, role-play afforded the opportunity to try out and practice.

There seemed to be three areas in which role-play was particularly useful: (1) therapist feelings, (2) elucidation of hypotheses concerning patient dynamics, and (3) discovery and solution of problems in communication and technique.

THERAPIST'S FEELINGS

During the observation period, each therapist was able to identify areas which caused anxieties in his partner (e.g., affect-laden or sexual topics, silence, and questions concerning the worth of therapy). Quite often, the ability of the observer to pinpoint those areas which caused difficulty for the partner was sharpened by his own recent experience with similar difficulties. It was found that intellectual discussion was not sufficient to adequately communicate observations which had been made during the therapy session. In an effort to improve communication between observer and therapist, role-play was structured around the particular areas of difficulty. This produced in the therapist some of the same feelings which had been experienced during the hour. In the safety of the role-play situation, these feelings were highlighted, and thus became undeniable. Moreover, it was possible to examine how these emotions consistently interfered with the therapeutic process.

This method of dealing with the therapist's feelings can be illustrated by the following example: One of the therapists was seeing a patient who continually made intimidating remarks concerning the worth of therapy. In

the hour, the observer recognized that the therapist seemed to ignore these remarks; furthermore, the therapist was unaware of his angry feelings about these remarks. In the role-play sessions the observer repeated one intimidating remark after another in an exaggerated fashion until the therapist reacted, as in the hour, with hurt and then with anger. At this point, the role-play was stopped and the interaction minutely examined. The therapist could no longer deny the anger nor the source in the hour which had provoked it. The anger could now be discussed and adequately dealt with.

HYPOTHESES CONCERNING DYNAMICS

There may be a bewildering number of hypotheses concerning possible dynamics and symptom etiology. Role-play was seen as helpful to the beginning therapist, not only in uncovering, but also in making decisions to accept or reject certain dynamic formulations.

The patient often gives important pieces of information the significance of which is not understood at that time. For instance, a patient gave an involved, confused, contradictory and affect-laden report concerning her inability to walk to the front of the church and take communion. The patient was neither able to clarify the meaning of, nor to explain her feelings about, this experience. Nevertheless, both psychotherapist and observer were convinced that this was an important and meaningful event. During role-play of this scene, questions as to the meaning of the event were asked again and again, as they were during the hour, until there occurred an intuitive response on the part of the "role-play patient." This response had not been previously verbalized by the actual patient. The meaning of the patient's communications in the previous hour was clarified when the "role-play patient" blurted out: "I can't because I am evil." The entire role-play process was based on the therapist's construction of the patient's personality. It seemed that the role-play tapped an intuitive understanding of the patient's dynamics which had remained unavailable during mere intellectual discussion. It was felt that these intuitive insights could, under certain conditions, be extrapolated to represent that which the patient had been unwilling or unable to make explicit.

Unlike these intuitively correct responses, some role-play responses were easily recognized as totally out of character with the personality of the patient. A discussion of why the patient was unlikely to respond in this way led to a better understanding of the patient's personality. Some role-play responses were felt to be neither intuitively correct nor obviously incorrect.

These served to alert the psychotherapist to areas which needed further exploration.

In general, the role-play made conscious some of the therapist's covert, intuitive hypotheses under conditions where it was possible to examine, discuss and make decisions concerning the implications of these hypotheses for psychotherapy.

COMMUNICATION OF ERRORS IN TECHNIQUE

Therapeutic technique is intimately bound up with the ability of the therapist to be sensitive to and understand the personality dynamics of the patient. The ability to relax, feel secure and be objective is also important. Although technique is often considered to be a matter of individual style and theoretical bias, there seem to be some common skills which are used by most successful therapists. These include the ability to tolerate silence, to ask incisive open-ended questions, to learn how to "stall," and to give "asocial responses" (Beier, 1966). Errors in technique can arise from a lack of experience as well as from strong feelings of fear and anxiety.

Role-play is particularly well suited to exposing errors of technique. It can bring these errors into vivid focus at a point where action can be stopped and alternatives can be discussed, tried out and practiced until the beginning therapist feels comfortable. This, in addition to supplementing his experience, allows the therapist an opportunity to explore new and varied techniques.

During role-play the therapist can generally be expected to repeat the same faulty techniques he employs during the therapy hour. One of the therapists, for example, habitually asked leading questions, leaving the hour frustrated at the lack of meaningful information he was able to elicit. During role-play he again asked leading questions and experienced this frustration. Discussion at this point with the role-play partner allowed him to become aware that his leading questions were preventing the patient from answering freely. The therapist was now able to experiment with alternative questioning techniques until he found one which was both effective and fitted his individual style.

On occasion a beginning therapist may have a tendency to respond in a way which reinforces the patient's neurotic patterns. When this occurs the therapist often feels uncomfortable but is unaware of the source of this discomfort. An observer can frequently pinpoint the specific interaction which preceded the therapist's non-therapeutic response. This interaction can be role-played, allowing the therapist to re-experience the interactions under conditions where his feelings and their cause can be fully discussed and understood.

A beginning therapist is often confronted with a patient who uses the therapist's student status as a way of undermining the therapy hour. The therapist is left with strong feelings concerning this test of his adequacy. Typically, the therapist reacts defensively. This results in a spiraling non-therapeutic interaction. Role-play of this interchange is carried out with the "patient" continually attacking the "therapist" until the therapist responds defensively. The action can be stopped and discussed. This discussion serves to relieve tension and anxieties and gives the therapist the freedom to experiment with new ways of responding. In turn, the observer, playing the part of the challenging patient, can report his feelings and reactions to these new techniques. If the roles of observer and therapist are reversed, the observer, now playing the part of the therapist, can become a model opening up to the therapist even more variations in technique. Furthermore, the therapist can gain insight into how the patient might feel.

PRECAUTIONS

Although role-play is useful as a training technique for beginning psychotherapists, certain requirements must be taken into consideration. The role-play technique requires two compatible individuals who can give and take criticism in sensitive areas. The members of this dyad must supply each other with encouragement and friendly support while investing a large amount of time in a mutual learning effort. Furthermore, the technique requires individuals who are flexible and free enough to role-play creatively.

Although it can lessen the time commitment of the supervisor, it is necessary to have an experienced therapist available to give supervision. It is particularly useful when the same individual supervises both members of the dyad in joint sessions. This allows the role-play dyad to maximize the benefits of supervision. For example, criticisms made during supervision to one member, but not understood or assimilated by him, can be clarified later by the other member.

The role-play technique, however, has certain limitations which should be noted. The dyad may become engaged in a "folie-à-deux." Although the pair may be compatible and communicate openly, they may reinforce each other's errors. It is also possible that the individuals form an incompatible dyad. In such case, while each member recognizes the other's errors, communication between the pair is precluded. One other possibility is that a pair may be initially open and compatible, but progress in one member may be more rapid than in the other. This also could have the effect of closing off communication.

It is with situations such as these that a supervisor becomes an invaluable adjunct to the role-play technique.

SUMMARY

Although there seems to be certain limitations to this training technique, in general it was found to be of value. The members of the role-play dyad form an intimate working relationship which affords the opportunity to experience another beginner's style, techniques and modes of dealing with the patient. It seems to diminish anxiety, develop technique and help resolve problems. Possibly, just as important, it gives the beginning therapist hours of extra experience during the crucial beginning stages.

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PSYCHODRAMA CRISIS INTERVENTION WITH DELINQUENT MALE DRUG USERS

ADELE DEETHS

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During one week end six adolescent boys who are in residence at Charila III in Stockton, California, went back to using drugs. As a result of this, they were sent to the regular on-going Monday evening Psychodrama session. "The subjects being approached in the midst of an actual life situation and not before or after it. The situation was caught in statu nascendi and the subjects warmed up to it."[1] The Psychodrama group consisted of twelve adolescents of both sexes who have participated in Psychodrama for about six months; some of them have also been in training as Psychodrama leaders with each other as protagonist. On the whole they are serious, aware, and in touch with their feelings. They accepted the six boys into their group and agreed to try to handle the problems.

The six boys from our Stockton Residence were stepping into a yet-unknown world—a world in which teenagers trusted themselves and one another, and looked forward to adult guidance. The group seated themselves in a semi-circle, the lights dimmed, and the stage was prepared for a drama of life. Two processes were happening here. One being the crisis intervention taking place in one residential treatment center for another new "brother" residential treatment center, and the other process being the boys' identification with the already established Charila philosophy, i.e.; learning how to live and trust one another. Stockton's Charila III had just opened and we had not yet worked with the boys to any extent.

The boys were belligerent, outspoken, loud, cohesive with one another—and rebellious and non-trusting to any outsiders. They had weak ego strengths, some had egos so little "intact" that they sometimes tended toward hibernation. They were sticking together to "prove us failures." I asked three of the girls in the group to take over. These three were bright girls who were in training and had directed Psychodramas before. The girls ability to handle the direction is therapeutic and provides them with an area to use their own integrations.

One, Alicia, acted as director, while the other two, Cathy and Melonie, acted as assistants, doubles, etc. Alicia is a graduate of the Charila Foundation. The Foundation consists of three residential treatment centers, two for

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[1] Moreno, *Who Shall Survive?*, 1953.

girls over 16 years in San Francisco, and one for boys over 16 in Stockton. The main modality of treatment is Psychodrama; two group sessions per week are held with the girls in San Francisco; one being a training session for those who show interest and ability, and the other being the Monday night group which consists of the girls in training and other youngsters— "out patients"—who come from all over the San Francisco area. They come voluntarily, knowing that they must stay for at least eight sessions before they become a member. There is no charge. They look forward to the weekly sessions and seldom want to leave. We deal with such problems as drugs, getting along with authority, peer-group relationships, identity: in short, learning how to live. Thus we use Moreno's conception of therapy for the people by the people.

Alicia started the Psychodrama by bringing all six boys on stage. Alicia knew (by past experience of her own) that they would not want to cooperate, yet desired the needed attention. Not wanting to participate, the boys were saying that all females are bitches. They were using the usual ways to get and keep distance. It soon became evident that one boy, John, was the leader, so the girls dismissed the others and kept him on stage. John is 18, and Caucasian. Little by little Alicia worked on his defense system. Cathy and Melonie doubled for him with such things as, "I'm afraid to trust, I might get hurt, if I stop gaming, what will happen to me." John still kept his "speed games" going, i.e. answering a question with a question, and making up riddles. He refused to enter into any of his real feelings.

He was so expert at avoidance that eventually the whole group, including the other boys, were feeling extreme frustration. I allowed this to build leaving John falsely in control. He was the center of attention, the hero, winning with his games against the group who represented the world. He was also a "mirror" for the other five boys and they began to dislike the behavior in him that they knew themselves to use. At one point Alicia asked me if she could make the group physically close in on John and then have him "break out" with his feelings. I responded with an affirmative, knowing that John wishes closeness yet does not show real feelings in order to get close, as he is afraid of being rejected. He displays this in taking drugs, involving himself in situations where young people "shoot up" on speed or heroin (they often "fix" one another) and huddle in one another's arms—yet never make intimate contact. They have intimacy with the "orgiastic" drug rather than a fellow human being. The group including the five boys circled around John away from the stage. A group dynamic was in process, the boys now felt a part of the larger group in the *excitement* of the struggle. They all shouted, "try to break out, John, try to break through into real feelings. Real feelings,

John!" (Chanting here.) Finally John tried to break through and found it more difficult than he had anticipated. This was no game. In a flash of competitive desire and manly prowess he broke through and was pinned to the floor by one of the five boys from Charila III who shouted at him to be "real." John managed to break from him and was up on stage. As soon as he regained composure he went into the "wall of no feeling" and laughed at everyone. The boys then turned to me helplessly and said, "Well, Mrs. Deeths, what do you do with him?" In this moment the peer group gave up their authority and handed me their shield to go into psychic combat.

I pause here to give the reader some background on John. His history was uncovered primarily through the tool of Psychodrama. He comes from a background of extreme emotional deprivation. At age 14 he found his mother dead of carbon monoxide poisoning in their garage. He has never known his father, who died when John was born. John went to live with an Aunt and Uncle where he felt unwanted—the Aunt always compared him unfavorably with her own son. John holds a deep-seated resentment of his Uncle for living and marrying a woman who can give so little to him. He started "acting out" by cutting school and stealing, and finally he went the hard drug route (amphetamines and heroin) to fill and at the same time to conquer the fear and emptiness inside him, thus putting him in a double bind of the drug. His "gaming" is a way of keeping distance from real feelings and the real world. He is afraid of "murdering" those who have "murdered" the fathering and mothering parts of themselves. Though he does not lie, he does not trust adults because of his extreme fear that they will let him down. He is always on the edge of a psychosis; the drugs and games are a way for him to "hold himself together." It was necessary to get John to give up his defenses in order to deal with his regressed ego states and develop new growth processes. In Psychodrama this would be called a "rebirth." (Symbolic of the Earth Mother who can take away as well as give.)

I proceeded to the stage knowing that at this point it was crucial to unleash John's anger, which is the feeling he fears most and which drives him to destroy himself. Anger because of the violent and untimely death of his mother and towards women in general because of their not taking care of John's needs. These ambivalent feelings toward his mother are now directed toward himself. He is caught in the "squeeze" of the need of being nurtured and the overwhelming fear of being rejected.

John was gaming, chanting, "I'm not a real person, I never was, I'm not I, I have no mother, nothing is real." I shouted, "You're right John, you are not you, you have no mother, your mother's a bitch, all females are bitches; you're right John, we're all bitches, your mother's a bitch, she left

you, you're like her, leaving us, go—go to Juvenile Hall—go to hell!" With this John with clenched fists swung at me and two boys from his group jumped on stage and a fist fight was on. I allowed it to go on as it was a healthy expression of feeling, some discharge of John's hostility, and there was no danger to anyone. After two minutes the boys were exhausted. John was breathing heavily but still standing. I took him by the shoulder and had him sit down. John hung his head and talked of his being violent. I explained how using anger at the right time in the right place was acceptable, that his fear of violence was distorted, that he was all right and could learn to control these feelings. He looked at me and there were tears in his eyes. I had Alicia dim the lights to dark-blue. I moved in as an auxiliary ego: John's mother returned from the dead to talk to him. Recognizing this to be a crucial time, I wanted to establish a "contact" between John and myself, a new female role model. He now held tightly to my hand. I told him that my death was not his fault and with this John answered, "I should have been there Mom, I should have spent more time with you—I should have told you I loved you." I gave him full support, responding, "You did, John." John answered, "But I shouldn't have always been running away." I said, "Some things I did frightened you John, that's all, can you forgive me, can you forgive yourself?" John: "I'd like to." I said, "I love you John,—forgive both of us." John, "Yes Mom." John was crying and I held him; he was now the warm human being that we knew him to be. Neutralizing his feelings of guilt was necessary in order to "relieve" his feelings of anger toward himself and establishing a new framework in which he could live more comfortably.

Slowly I had the lights go up and with my arm around him we shared feelings of others in the group. The entire group was moved and our tears were shared as well as our joy of closeness. Alicia held John's hand and we concluded the session with her adding, "Welcome to the group, John. We like you now." John now could understand, by our and the group's positive reactions, that he needn't any longer fear showing, and running away from, his feelings.

Those of you who are not familiar with Psychodrama may be sceptical about such sentimental "trickery." For those I have included the following: two days later I again saw the boys at Charila III. They were much more open toward me and John was showing real feelings. His behavior was much modified. He talked freely to me about how he stopped "gaming" since Monday night's session. He was being himself and feeling, although this was fearful for him. There will be no miracle cure, but John is now on the way towards better health and a resultant better life. Though it will be difficult and slow, the first step has been taken.

THE PROTAGONIST IN HUMAN RELATIONS TRAINING

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A most significant and highly visible phenomenon in the group move-
ment has been the rapid proliferation of here-and-now, feeling-oriented,
action groups. Described by such combinations of adjectives as "sensitivity,"
"encounter," and "growth" these activities seem, to many observers, to have
mushroomed spontaneously and ahistorically. J. L. Moreno (1969) has shown
that this specious view is not valid, for authentic encounter groups model
themselves after his classic pre-World War I definition of the encounter. The
growth of the National Training Laboratory (NTL) (and its, in many in-
stances unwanted, offsprings, the extensive growth center network) was
facilitated in infancy by the creative ideas and methods of the Sociometric-
Psychodramatic Institutes. In addition to outlining the history of the NTL,
Moreno has listed the assets and liabilities of both Bethel and Beacon as a
pioneering effort "to establish valid standards of teaching and training" and
thus prevent a further "hippiephrenic . . . disintegration of our American
culture" (Moreno, 1969).

Following Moreno's implications, this study attempts to illustrate how
psychodrama and the laboratory approach can function harmoniously to-
gether. Beyond that description, it is an effort to contrast patterns of change
in two types of patients undergoing the laboratory experience: the laboratory
psychodrama protagonist compared to the laboratory nonprotagonist.

The Human Relations Training Laboratory for psychiatric treatment
of veterans, also known as the Patients' Training Laboratory (PTL), was
established in 1961 as a new and experimental approach to the treatment
of behavior problems (Hanson, Rothaus, O'Connell, & Wiggins, 1969). In
departing from traditional psychiatric treatment modes, the PTL borrowed
concepts from social psychology and industrial management training. On this
open psychiatric ward, patients are subdivided into three or four small groups
called "Development Groups" (D-groups) of seven to nine men each. These
groups meet daily for 20 five-hour sessions. For about half of this time the
groups are self-directed, i.e., without a staff member present. These daily
sessions are the unstructured part of the D-group meetings. Within these
D-groups patients discuss their personal problems, study group and social
dynamics, and assist one another in better interpersonal and self-under-
standing. The participants are exposed to lecturettes and group exercises

demonstrating group dynamics, styles of problem-solving, participation, and problems in communication and conflict.

In 1966 psychodramatic methods were introduced on the laboratory by the principal author on a semiweekly basis. Occasionally the psychodrama protagonist was a volunteer. More often he was "volunteered" by his D-group because his behavior created group problems or he was more willing to expose himself under group pressure. The protagonist may also be viewed as the more *active* patient as opposed to the more *passive* nonprotagonist (O'Connell & Hanson, 1970). Each protagonist was limited to one 90-minute session. Auxiliaries consisted mainly of psychology graduate students, assigned to the laboratory usually from three to six months, with an occasional volunteer from the community. These students also had the opportunity to learn to direct psychodrama and about one-half of them did so at least once during their training. Another atypical feature of the laboratory psychodramas was the relationship of the director of the session to the average patient. The principal author (the main director and trainer) was relatively unknown to many of the patients. Each trainee was a consultant to one group and functioned as a process facilitator for one session a week. A strength and weakness of the PTL D-group is that trust is often focused on óne's own group. Therefore the conventional patterning of the director working with people he knows (and who are strangers to each other) (Haskell, 1967) was missing on the PTL ward.

SUBJECTS AND DEPENDENT VARIABLES

Two groups of Ss are to be considered, a larger sample of 176 male veterans (38 protagonists, 138 nonprotagonists) from 19 D-groups, and a smaller sample of 72 selected from the 176. Some of the findings from part of the larger group have already been reported (O'Connell & Hanson, 1970). The sample of 36 protagonists and 36 nonprotagonists was formed later from Ss with complete data on all variables. In order to safeguard the power of the statistical tests, the nonprotagonist group was reduced in size by random sampling to equal the number of protagonists.

Pre-Post Ratings

Protagonists and nonprotagonists on the laboratory were tested before treatment and about one month later at the end of their laboratory program. The self-report instruments used and the information gained were:

Personal Beliefs Inventory (PBI). Sixty items measuring the extent of "negative nonsense." (O'Connell & Hanson, 1970).

K scale. Thirty true-false items to estimate degree of defensiveness. This scale is a validating scale of the MMPI.

Own Death Cluster (ODC). Twelve true-false statements designed to elicit the extent of a fearful preoccupation with one's own death (O'Connell, 1968).

Social Reaction Inventory (SRI). Twenty-three statements which comprise what is often called the internal-external locus of control test (I-E). Gives an estimate of extent to which person reports he can control (or is controlled by) his environment (Lefcourt, 1966).

Personal Behavior Questionnaire (PBQ). Ten statements for rating degre of psychological disabilities (PSS) and the same number of items pertaining to somatic difficulties (SSS).

First Versus Fourth Week Ratings

Each D-group member rated peers every week with a 23-item sociometric scale. This task required members to choose one or two D-group members who were perceived as "the most" or "the least" on specific D-group behaviors. A patient's score was a percentage based on the number of times selected, divided by the total possible, with self-ratings excluded. The sociometric data consisted of ratings taken on day five and day fifteen on the Group Behavior Questionnaire (GBQ). Another peer rating device used was the Participation Scale administered after each of the 20 unstructured group sessions. In this study members rated each other, including self, on a 9-point scale from "did not talk at all" to "talked constantly." Initial scores consisted of an average of D-group ratings for sessions one through five and final scores were means of sessions 16-20.

Pretreatment Psychological Testing

Three psychological tests were included which were administered only at the pretreatment testing. These were the Edwards Personal Preference Schedule, the Kuder Preference Record, and an intelligence measure (from either the Army General Classification Test or Wechsler Adult Intelligence Scale).

RESULTS

Pre- and Post-testing

Analyses of variance for the SRI, *K* scale, and ODC demonstrated pre-post laboratory differences (see Table 1). On the SRI patients developed a more internal locus of control ($p < .001$) Protagonists and nonprotagonists

TABLE 1
PRE-POST SELF-REPORT TESTING (N = 72)

Test	Group	Pre (P_1)	Post (P_2)	F	Source	$p <$
SRI	P	8.7	5.5			
	NP	8.7	7.3	21.9	P_1 vs P_2	.001
				3.5	Interaction	.10
K scale	P	10.1	12.2			
	NP	10.5	10.6	4.46	P_1 vs P_2	.05
				3.62	Interaction	.10
ODC	P	4.6	4.0			
	NP	4.4	4.0	5.58	P_1 vs P_2	.025
PBQ (SSS)	P	6.3	4.5			
	NP	5.9	3.7	33.6	P_1 vs P_2	.001
PBQ (PSS)	P	8.5	6.1			
	NP	7.5	4.7	33.0	P_1 vs P_2	.001
				3.10	P vs NP	.10

started the laboratory about equal, but protagonists developed a more pronounced internal frame of reference ($p < .10$). K scores increased for laboratory participants as a whole ($p < .05$), but more so for the protagonists than nonprotagonists ($p < .10$). Preoccupation with one's death (ODC) decreased from pre- to posttesting ($p < .025$). Reported somatic (SSS) and psychological (PSS) symptoms likewise decreased ($p < .001$). Protagonists were higher both pre- and posttreatment on reporting psychological symptoms ($p < .10$).

First Versus Fourth Week Ratings

There were no significant differences between first and fourth week on protagonist-nonprotagonist groups for self-ratings on the amount of participation. Protagonists talked more than nonprotagonists ($p < .10$) and the amount of talk for laboratory participants increased over time ($p < .01$) but only when the process was evaluated by others rather than the self.

For the larger sample of 38 protagonists and 138 nonprotagonists, the four weekly GBQs were averaged, giving a mean weekly percentage indicating the percentage of peer choices throughout the laboratory sessions. Analyses of variance for protagonists and nonprotagonists were computed for all 23 items. Ten of these separated the protagonist from the nonprotagonist, with the former having the higher scores. Protagonists were regarded by fellow D-group members as more prone to talk about their problems in deal-

ing with others ($p < .0001$), having a great desire to accomplish something ($p < .001$), and to gain attention ($p < .001$). Their behavior was seen by peers as competitive ($p < .01$), hostile ($p < .02$), leading to open confrontations ($p < .02$), and hurting others with sarcastic wit during tense group situations ($p < .01$). In a somewhat contradictory manner they were also seen as needing direction and support ($p < .08$) and talking about unrelated topics ($p < .03$). In comparison with the 138 nonprotagonists, the protagonists attended more group sessions ($p < .01$) and were talked to more often ($p < .08$).

The previous description gives no indication of changes between the independent variable groups during the laboratory. For this purpose Groups X Trials analyses of variance were calculated for the smaller sample ($N = 72$) using the first and fourth GBQ and participation scales as pre- and postmeasures (see Table 2).

Overall, the flow of the group processes seemed to be in the direction of increasing overt activity from a passive beginning. Average scores increased from the first to fourth weeks in rivalry ($p < .025$), attention-getting ($p < .05$), failure to influence others ($p < .05$), overt clashes ($p < .10$), sarcastic wit ($p < .10$). These changes were often the result of decreases in the number of very small percentages received by peer ratings, blanks, and self-ratings (the self-rating was voided in this study).

Four sociometric items were of particular interest to a study of protagonists' behavior. Initial protagonists' ratings on "gives in most easily" indicated that they did this less during the latter part of the group's life; the interaction was significant at the less than .01 level. Protagonists had slightly higher attention-getting ratings initially, and gained significantly ($p < .025$) over the nonprotagonists as the group progressed. On items tapping a desire to accomplish something and talking about interpersonal conflicts, the protagonist, again, was higher than the nonprotagonist in the beginning and maintained the high rating over time (p's of $< .10$ and $< .025$).

Two psychological tests were administered before the laboratory experience. On neither of these, the Edwards Personal Preference Schedule and the Kuder Preference, were protagonist-nonprotagonist differences clear-cut. Nonprotagonists were higher on Edwards' categories on deference ($p < .10$) and order ($p < .20$) while protagonists scored higher on heterosexuality ($p < .10$). Similar two-tailed t tests were calculated on the group differences shown by the Kuder. Only two scales differentiated between the groups. Protagonists were higher on artistic interests ($p < .05$) and nonprotagonists scored higher on persuasive interest ($p < .10$).

TABLE 2
ANALYSES OF VARIANCE FOR SOCIOMETRIC
AND PARTICIPATION ITEMS $(N = 72)$

GBQ item	Group	First week (1)	Fourth week (4)	F	Source	$p <$
2. Which two are least able to influence others to change their opinions?	P	21.9	28.5			
	NP	23.6	28.6	4.47	1 vs 4	.05
3. Which two have clashed most sharply in the course of the meetings?	P	25.1	33.3			
	NP	23.4	26.5	3.01	1 vs 4	.10
5. Which two give in most easily to what other group members want?	P	22.1	18.2			
	NP	17.4	27.6	8.32	Interaction	.01
8. Which two try most to get attention from other group members?	P	26.9	42.3			
	NP	23.6	22.4	6.40	Interaction	.025
				4.72	1 vs 4	.05
				2.97	P vs NP	.10
10. Which two are most likely to talk about their problems in dealing with others?	P	30.6	37.6			
	NP	21.4	24.1	5.27	P vs NP	.025
11. Which two have shown the greatest desire to accomplish something?	P	29.0	31.2			
	NP	19.2	23.1	2.89	.10 P vs NP	
15. Which two have shown the most hostility in group meetings?	P	24.5	30.9			
	NP	19.8	25.7	3.24	1 vs 4	.025
17. Which two have competed the most with others, in the sense of rivalry?	P	28.8	37.5			
	NP	26.8	31.1	5.27	1 vs 4	.025
23. When there is a lot of tension and nervousness in the group and everybody seems wrapped up in his own problems, which one says or does funny, sarcastic things which disrupt the group and hurt other members?	P	11.4	18.2			
	NP	7.6	10.4	3.29	1 vs 4	.10
Participation scales (Ratings by others)	P	4.8	5.1			
	NP	4.5	4.7	7.39	1 vs 4	.01
				3.59	P vs NP	.10

Demographic variables which showed group differences were age, marital status, and number of D-group meetings attended. In the t tests between the nonprotagonist and protagonist groups, the latter were found to be younger patients, 36.8 versus 43.3 ($p < .002$). With marital status, more protagonists were single while nonprotagonists consisted of more separated and widowed individuals ($p < .05$). Nonprotagonists attended a greater number of D-group sessions, 19.3 versus 18.8 ($p < .20$). There were no significant differences between the active and passive psychodramatic types on intelligence, education, and diagnosis.

DISCUSSION

The results of this study are complicated by the age old question of "Which came first, the chicken or the egg?" In the terminology of this study the question may be asked, "Is the protagonist the protagonist because he is the more active patient and is the nonprotagonist the nonprotagonist because he is the more passive patient?" The more active patient exposes more facets of his personality, both consistent and inconsistent, than does his less active counterpart. As a consequence of his high level of activity he may get rated on many variables primarily because of a halo effect. For example, the passive patient may be more hostile but keeps his behavior under wraps and, therefore, does not get rated by his peers on this dimension. The active patient may be less hostile but because he is more open about his behavior, it gets picked up in the sociometric ratings. Therefore, in this study, the term protagonist may be one way of identifying the more active patient. As a consequence of his high level of involvement, however, he learns more about himself and his behavior may undergo more modification through the corrective process of feedback. The results here support many of the previous findings on the laboratory and the clinical hunches derived from personality theory.

In the laboratory method, two kinds of learnings are emphasized, process learning and action learning. Process learning focuses on the exploration of one's self and one's impact on others and the dynamics that occur in interpersonal and group relations. Once the process is understood, action learning is more concerned with learning skills; how to act or react in particular situations, e.g., how to give constructive feedback, or how to resolve conflict productively. Psychodrama or action therapy provides an excellent vehicle for acting out and practicing interpersonal skills. One of the major problems, however, is to get the less active members to participate in the role of the protagonist. The present study is an attempt to look at some of the dynamics

and behaviors that appear to differentiate the more active protagonist from the less active nonprotagonist. More specifically, what does the passive non-protagonist tell himself that keeps his level of participation and involvement in the treatment program minimal? Getting some direction from this information, what kind of interventions can we make to increase his participation?

When considering the total group, the overall result suggests that as the program progresses patients get more active, express negative feelings more readily, and talk more realistically about their symptoms. During this time complaints about their own psychological and somatic symptoms decrease along with anxiety about their own death. In addition, patients develop a more internal locus of control rather than projecting control of their own behavior on to the environment. The laboratory experience with psychodrama reduces, at least temporarily, the needs for perfection, self-hatred, and fear of others. A previous study (O'Connell & Hanson, 1970) also revealed increases in courage and interpersonal tolerance at the end of the laboratory program.

Over and above the results described above, the protagonist is even more active, talking more about his problems, attempting to gain more attention, expressing achievement needs, and his own feelings, both positive and negative, than the nonprotagonist. The active protagonist seems to be more willing to expose himself in a variety of situations to get the atteniton he desires.

On two PBI items the laboratory members actually increased in "pathological" thinking: "helping others by criticizing" and "rebel against doing things unpleasant." The protagonist initially tends to be somewhat higher, and later in the program lower than the nonprotagonists. These two items may be related to the laboratory's emphasis on giving and receiving feedback and assuming responsibility and initiative for one's own behavior and problems. In the initial phases of the laboratory training, feedback tends to be critical and judgmental, moving toward a more descriptive and nonevaluative feedback as group members begin to understand this concept more thoroughly. Rebelling against doing necessary but unpleasant things may have been erroneously construed as becoming more independent. The more action oriented protagonist may have worked this problem through in psychodrama and in other laboratory activities.

One of the current criticisms of encounter groups centers around fears that the individual's integrity will be overwhelmed by group demands and pressures. The results in this study and previous studies suggest a counter trend. The focus on the democratic process through the laboratory-psychodrama combination of treatment resulted in increases in self-esteem, inner-directedness, openness in rivalry and expressions of hostility and wit. These

results were accompanied by decreases in distancing from others and ability to influence them. The influence process in the laboratory method can be seen as strengthening individuals' will to withstand group pressures when they are unreasonable or work against one's own values. Support for these results were found in a previous study (O'Connell & Hanson, 1970) in which the protagonist's needs for attention and accomplishment increased while his need for group compliance decreased.

Some of the results between the larger and smaller samples seemed to be contradictory. For example, the protagonist talked more about his own problems in dealing with others, yet in the larger sample, he was rated as discussing problems not directly related to the group's task. Since the protagonist is more active, he gets rated on more dimensions. This pervasive interpersonal activity is what the nonprotagonist avoids and, therefore, fails to get positive reinforcement. Another inconsistency is that both the protagonist and nonprotagonist in the two samples were seen as attending sessions more regularly. The smaller sample contained complete data on every subject and the difference in attendance appears to be a function of who drops out quicker. The nonprotagonist attends more regularly but drops out earlier than the protagonist. That is, while the more passive nonprotagonist is in the program he conforms more to the guidelines and schedules than does the more active protagonist. However, more nonprotagonists drop out of the program than protagonists. These results again focus on the problem of the more passive patients who, because of their lack of involvement and participation, do not get the rewards and learnings as do the active patients. Rather than looking at his own inactivity as the cause of his dissatisfaction and lack of accomplishments, however, he blames his surroundings. He again sees his failure as "they didn't do me any good." The nonprotagonist group was older and less active than the protagonist group. One might question whether the passive and more conforming behavior of the nonprotagonist group might be a consequence of more frequent hospitalizations. In other words, were they trained to be more conforming as passive "good patients" by their contacts with hospitals? This question is being explored in a current study.

This study was the initial pilot study in a project exploring patient, director, and environmental variables on the results of psychodrama in the human relations laboratory program. In fact, whatever specific changes were obtained by the protagonists in this study are confounded by several contaminating factors:

1. The protagonists were restricted to one session. Protagonists now have the added benefit of feedback from audio-visual tapes. Clinical evidence

on the laboratory suggests that the process of exploring self-esteem, insight, and outsight is facilitated by the use of TV equipment in our psychodramas.

2. Evidence from other laboratory studies suggests that a more basic dimension being studied here is that of the active versus the passive patient. Another study, to be implemented shortly, will try to differentiate more clearly the impact of psychodrama on both active and passive patients.

3. The failure to use "pure" volunteers minimized the potential protagonist-nonprotagonist differences. During most of the period D-groups were given the assignment of producing a protagonist—who often was the most problematic member—and volunteers from other groups were not considered.

4. The absence of well-trained auxiliaries does not, as a rule, lend itself to maximizing potency of the method. During most of the sessions the trainees were experiencing their first exposure to psychodrama. Frequently they were strangers to the active optimism and openness which increase psychodramatic effectiveness.

5. A failure to coordinate testing with the treatment variable. It was possible for a patient to become a protagonist *before* his initial testing as conversely he could have done so *after* the posttesting. These unfortunate possibilities may have diluted the effects of being a protagonist.

All the above control problems which favor an underestimation of treatment potential (the Type II error) will be attenuated in future, more intensive psychodrama research. Further research must aim toward more involvement for the passive group and follow-up studies to measure duration of change.

SUMMARY

The encounter group movement is greatly indebted to the seminal ideas and techniques of J. L. Moreno in spite of public unawareness of this historical development. This study illustrates how both approaches, psychodrama and human relations lab training, can function harmoniously. Over a four-week treatment period, these methods helped elevate their self-esteem and move toward others with an increased spirit of problem-solving. The protagonist entered treatment as a self-punitive person, more willing to admit and talk about psychological problems. Following the group treatment he became even more active and less willing to submit to group pressures. Unlike his fellow laboratory participants he did not appear to increase his criticism of others or withdrawal from unpleasant tasks. He became more inner-directed and less prone to use his symptoms for interpersonal gain. The nonprotagonist posed a formidable treatment problem. He was more likely

to view himself as a victim of fate and demanded that others change. His talents were often used in the service of continued passivity. Older and with more marital stresses, he was more likely to leave the program prematurely and did not attain the level of self-directed activity of the protagonist. Later studies will focus upon intense exposure to psychodramatic methods with community follow-ups.

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ATTENTION: TO THE READER, Editorial Note

The cover of our journal will show a new title, beginning with this issue:

GROUP PSYCHOTHERAPY
AND
PSYCHODRAMA

in conformity with the title given to its forerunner, the first Bulletin by this name, as issued in SOCIOMETRY, in 1943.

PUBLIC PSYCHODRAMA IN PRAGUE

JAROMIR RUBES, M.D.*

Prague, Czechoslovakia

Sehr geehrter Herr Professor,
Mit meinen besten Wünschen für das kommende Jahr für Sie, Ihre liebe
Familie und vor allem für Ihr grosses Werk und Streben, will ich Ihnen
einem kleinen Ueberblick geben über das, was ich auf dem Felde des Psycho-
dramas in diesem Jahr unternahm.

Vor allem muss ich eine Ihrer Missverständnisse verbessern, die die Plakate,
die Ihnen gesandt worden, betraf. Es handelte sich nicht um Plakate für
unsere Kongresse in vorigen Jahr, sondern um Werbung *für eine ganz neue
Sache,* die ich jetzt in Prag seit Oktober diese Jahres realisiere!**

Begeistert durch Ihre Ideen habe ich in Prag mit dem, was ich "das öffentliche
Psychodrama" nenne, begonnen. Es handelt sich um offene, für jeden, der
bezahlt, zugängliche psychodramatische Vorsteluungen, die ich jede 14 Tage
im Kulturhaus "Zum Kastanienbaum" in Prag 6 vorführe.

Die Vorstellungen sind annonziert worden als eine Form Gesundheitswesen-
saufklärung, eine Schule für Erwachsene, wo sie neue Formen von zwischen-
menschlichen Beziehungen trainieren können und wo sie neue Eerfahrungen
der menschlichen Begegnung mitmachen mit Möglichkeit einer sogenannten
korrektiven Erfahrung.

Der Saal genügt für rund 80-100 Teilnehmer und es ist ein kleines Buffet
und Kaffee dabei, in anderen Tage sind dort Vorträge, Konzerte, Tanz, usw.
vorhanden.

Bei den Vorstellungen arbeite ich selbst als Direktor, ohne geschulten
Hilfsiche und habe nur zwei Assistentinnen, junge Psychologiestudentinnen,
die ich als sogennante "Computers" benütze, zum Stimmenzählen bei den
soziometrischen Wahlen, die ich sehr oft benütze. Es gibt natürlich zwischen
dem Publikum auch schon Leute die öfters kommen und die Technik schon

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soweit beherrschen, dass sie als eine Form von relativ standarten Hilfsiche
mithelfen. Ihre Anwesenheit ist vielmehr technisch verhindert, da die Tickets
für die Vorstellungen in Vorverkauf sofort ausverkauft sind. Ich aber glaube
dass mein Psychodrama im Laufe der Zeit von einem Modenschlager zum
Hilfsmittel für seriöse Interessenten übergeht. Auch den Preis der Tickets
haben wir zu niedrig gesetzt auf 10 Kcs und in den nächsten Turnussen
müssen wir es erhöhen.

Ein wichtiger Anteil muss ich auch der grossen Publizität zurechnen, die ich
dem Psychodrama in Zeitschriften, Revues, Rundfunk und Television in
diesem und vorigem Jahr erworben habe. Ich habe viele populäre Artikel und
Interviews veröffentlicht und ich kann sagen, dass das Psychodrama in der
Tschechoslovakei schon zu einem überall bekannten Begriff geworden ist.
Oft kommen jetzt zu mir die Schriftsteller, Regisseure aus Television und
andere, und wollen sich beraten, über ihre Pläne das Psychodrama in ihre
Theater und Bücher einreihen. Sie wollten auch meine Vorstellungen im
"Kastanienbaum" in Rundfunk, TV und Film übernehmen, aber das habe
ich a limine verboten und habe meinem Publikum versprochen, dass sie
niemals bei dem Rollenspiel aufgenommen werden. Das tschechoslovakische
Rundfunk macht das also auf die Weise, dass sie zu jeder Vorstellung kom-
men und interviews mit den Teilnehmern vor und nach der Vorstellung
machen, und auch mit mir nach jedem Vorstellung über meine Empfindungen,
Gratifikation oder Frustration. Die Tapes habe ich noch nicht gehört, weil in
der ersten Etappe will ich mich nicht vom Publikum zuviel beeinflüssen las-
sen und ich will zuerst meine eigene Form von Vorstellungen ein bischen
formulieren und durcharbeiten. Vor allem will ich, z.b. keine verbalen Inter-
pretationen geben und ich beendige die Vorstellungen ganz abrupt, entweder
in einem dramatischen Fortissimo der Vorstellung oder im Laufe des Abklin-
gen einer starken Emotion, womöglichst nicht nur des Protagonisten sondern
des ganzen Saales. Da bei dieser Form von "offentlichem" Psychodrama
handelt es sich vielmehr um dass Publikum als ganze, als um den einzigen
Protagonisten, der für mich früher ein "Erwärmer" des ganzen kollektiven
ist.

Diese erste Vorstellungenserie ist bis Juni 1970 geplant und ich hoffe dass ich
dann meine vorläufigen ersten Erfahrungen schriftlich verarbeite und Ihnen
zusende.

Ja und dann auch hinter der Gränze der Tschechoslovakei war ich mit dem

Psychodrama in diesem Jahre. In Lindau am Bodensee im Westdeutschland habe ich ein Vortrag gehabt auf internationalem Symposium über die Gruppenpsychotherapie und Gruppenarbeit mit Suchtkranken, dass die Rolle des Psychodramas bei der Nachbehandlung betraf.

Den Text werde ich Ihnen zusenden. Alle Teilnehmer haben ein Angebot gemacht, dass ich anstatt der Vorlesung etwas improvisiert vortrage—auf die Weise wie ich Ihre Vorträge gesehen hatte. Und die Teilnehmer waren so zufrieden dass man auf Ihren Wunsch das weitere Programm ein bischen verändern musste und ich habe noch am Nachmittag ein Psychodrama mit den Teilnehmern gespielt. Es wae keine kleine Leistung für mich, da in der ersten Reihe die Professoren Friedemann und Battegay sassen und supervisierten, und die fremde Sprache macht auch das seine dabei. Ich habe aber vielleicht sehr glücklich die Thematik erwählt mit einer gut tragbaren affektiven Ladung—die Ablehnung eines rezidivierenden Alkoholikers von einem Klinikarzt, die er an die Frau des Patenten äussert, usw., und so ging die Vorstellung sehr lebendig und befriedigend vor sich.

Einmal müssen Sie wieder nach Prag kommen um das "Kastanienbaum" zu sehen. Inzwischen wünsche ich nochmals alles Gute, eiserne Gesundheit und neue Erfolge im neuen Jahre.

Ihr, J. Rubes und Familie.

AMERICAN SOCIETY OF GROUP PSYCHOTHERAPY AND PSYCHODRAMA

30th Anniversary of the Society's Inception

The annual meeting of the American Society of Group Psychotherapy and Psychodrama will take place at the Hotel Americana, New York City, on April 1-4, 1971. Your active participation on the program is herewith cordially invited. Please contact Dr. Robert W. Siroka, 215 Park Ave. South, New York, N.Y. 10003, giving him the title of your presentation and any suggestions as to what form you would like the program to take.

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The number of organizations which seek some form of recognition from the World Center are increasing here and abroad. The following proposals are now being considered. With every Center specific arrangements have been made as to the training of students and their accreditation.

Associated Centers of the Moreno Institute are:

1. California Institute of Psychodrama in Los Angeles and San Francisco. Both are under the overall directorship of Lewis Yablonsky, Ph.D. The Los Angeles Branch is guided by Rev. Helen Hittson.
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SIXTH INTERNATIONAL CONGRESS FOR PSYCHODRAMA AND SOCIODRAMA

Amsterdam, Netherlands, August 22-27, 1971

This Congress will take place under the auspices of the World Centre for Psychodrama, Sociometry, Group Psychotherapy and Sociodrama, organized by the International Foundation of Human Relations.

During this Congress special attention will be given to a critical evaluation of psychodramatic and sociodramatic techniques and views, and the scientific meaning of techniques and experiences, with the intention of promoting the principles and uses of psychodrama and sociodrama as much as possible.

Scientific Programme

The theme of the Congress will be: Psychodrama and Sociodrama and the Process of Human Change. Attention will be paid to three main questions:

1. How may the change-inducing activity of psychodrama and sociodrama be explained in terms of psychodynamics and learning-theory, and consequently, what will be the choice of techniques and how will the results be evaluated.
2. How can the nature of psychodrama and sociodrama and that of individuals or social systems in need of change be described?
3. What is the impact of contemporary social and cultural change by which the individual not only gains increased possibilities for personal growth, but at the same time is held responsible for creating the very conditions in his relations with other human beings on which this personal growth can be achieved? What meaning do psychodrama and sociodrama have as exponents and promoting factors of these socio-cultural changes?

These themes will be dealt with in general scientific discussions and also in small working groups. Working groups will also be organized for the exchange of practical experiences, for the discussions of technical problems and cases.

Languages

The working language of the Congress will be English. However, if there is a strong preference for Spanish and/or French the use of simul-

taneous interpretation will be considered. Kindly state any preference on the preliminary application form.

Social Programme

On Sunday evening, 22 August, there will be an informal gathering. Also planned are an official reception, an excursion and a farewell party.

Participation

The Congress will be open to psychologists, psychiatrists and social workers concerned with the process of individual or social change.

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D. Grunwald

SECRETARIAT

All correspondence concerning the Congress should be directed to:

THE SECRETARIAT OF THE 6th INTERNATIONAL
CONGRESS FOR PSYCHODRAMA AND SOCIODRAMA

c/o HOLLAND ORGANIZING CENTRE
16 LANGE VOORHOUT
THE HAGUE
NETHERLANDS
and

MORENO INSTITUTE INC.
ZERKA T. MORENO, SECRETARY
259 WOLCOTT AVENUE
BEACON, N.Y. 12508, USA

ANNOUNCEMENTS

Sala Moreno, Belo Horizonte, Brazil

A theater of psychodrama has been built in Belo Horizonte under the direction of Dr. Pierre Weil bearing the name of Sala Moreno, 1970.

New Contributing Editor, Dr. Monica Zuretti

Dr. Zuretti, Buenos Aires, Argentina, has been appointed to Contributing Editor of the Group Psychotherapy and Psychodrama journal.

New Books

1. Portugese Edition, *Psychodrama and Group Psychotherapy*, Mestre Jou S.A., Sao Paulo, Brazil.
2. *Das Stegreiftheater*, Beacon House Inc., 2nd revised edition.
3. Italian Edition of *Das Stegreiftheater*, Torino, Italy.

Attention Reader — New Cover Title of the Journal

We return to the original title of the journal, *Group Psychotherapy and Psychodrama*. See bulletin in Sociometry, 1943, pag. 349-355.

International Council of Group Psychotherapy

Dr. J.L. Moreno (President) informs us that the Statutes of the forthcoming International Society of Group Psychotherapy have been accepted by the majority of its Council members.

ANNOUNCEMENTS

Report of the Fifth International Congress of Psychodrama and Sociodrama, Sao Paulo, Brazil, August 16-22, 1970.

1. Number of participants: 2,500. This number was constant during the day; at no time were less than 1,500 persons participating in scientific activities.

2. Scientific sections:
   1. Number of Psychodrama Workshops — 62
   2. Number of Expression Workshops — 21
   3. Number of Dramatized Discussion Groups — 25
   4. Number of Public Psychodramas — 6
   5. Number of Official Reports — 36
   6. Number of Films and Slides — 9

3. Spirit of the Congress — The Congress was psychodramatic throughout. Movement was intense. Spontaneity and creativity were strengthened by the informal climate and by the maximum freedom of expression of all the participants. Simultaneously intense emotional involvement of all kind was evident up to the closing session.

IN MEMORIAM

Eric Berne, M.D., May 10, 1917–1970

To our great sorrow Dr. Eric Berne died suddenly from a heart attack. He has been a Contributing Editor of Group Psychotherapy and one of the outstanding pioneers of group psychotherapy. His special contribution in psychotherapy was widely known as transactional analysis. He became widely known through his book *Games People Play* and through his internationally known lecture tours and workshops. A special obituary is being prepared.